Case 19-20586-drd7 Doc 1 Filed 06/26/19 Entered 06/26/19 15:21:28 Desc Main Document Page 1 of 55

Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
WESTERN DISTRICT OF MISSOURI, JEFFERSON CITY DIVISION		
Case number (if known)	Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pai	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on	Victoria	
	your government-issued picture identification (for	First name	First name
	example, your driver's	Lynn	
	license or passport).	Middle name	Middle name
	Bring your picture identification to your meeting	Dell	
	with the trustee.	Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years	FKA Victoria Lynn Kimble	
	Include your married or maiden names.	·	
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-0088	

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Debtor 1 Dell, Victoria Lynn Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years		■ I have not used any business name or EINs.	☐ I have not used any business name or EINs.
	Include trade names and doing business as names	Business name(s)	Business name(s)
		EINs	EINs
5.	Where you live		If Debtor 2 lives at a different address:
		700 N Kansas Ave Marceline, MO 64658-1137 Number, Street, City, State & ZIP Code Linn	Number, Street, City, State & ZIP Code
		County If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	County If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code
6.	Why you are choosing this district to file for bankruptcy	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.) Convenience of local creditors	Check one: ☐ Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)

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Document Page 3 of 55 Case number (if known) Debtor 1 Dell, Victoria Lynn Part 2: Tell the Court About Your Bankruptcy Case Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 7. The chapter of the Bankruptcy Code you are 2010)). Also, go to the top of page 1 and check the appropriate box. choosing to file under ■ Chapter 7 ☐ Chapter 11 ☐ Chapter 12 ☐ Chapter 13 How you will pay the fee I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay The Filing Fee in Installments (Official Form 103A). I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition. Have you filed for No. bankruptcy within the last 8 years? ☐ Yes. When District Case number District When Case number District When Case number 10. Are any bankruptcy cases ■ No pending or being filed by a spouse who is not filing Yes. this case with you, or by a business partner, or by an affiliate? Debtor Relationship to you When Case number, if known District Debtor Relationship to you When Case number, if known District

11. Do you rent your residence?

□ No.

Go to line 12.

Yes.

Has your landlord obtained an eviction judgment against you?

No. Go to line 12.

Yes. Fill out *Initial Statement About an Eviction Judgment Against You* (Form 101A) and file it with this bankruptcy petition.

Official Form 101

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Case number (if known) Debtor 1 Dell, Victoria Lynn Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole proprietor of any full- or part-time ■ No. Go to Part 4. business? Name and location of business ☐ Yes. A sole proprietorship is a business you operate as an Name of business, if any individual, and is not a separate legal entity such as a corporation, partnership, or LLC. Number, Street, City, State & ZIP Code If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate 13. Are you filing under Chapter 11 of the deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 Bankruptcy Code and are you a small business U.S.C. 1116(1)(B). debtor? I am not filing under Chapter 11. ■ No. For a definition of small business debtor, see 11 I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy ■ No. U.S.C. § 101(51D). I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. ☐ Yes. Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention Do you own or have any No. property that poses or is alleged to pose a threat of Yes. imminent and identifiable What is the hazard? hazard to public health or safety? Or do you own If immediate attention is any property that needs needed, why is it needed? immediate attention? For example, do you own perishable goods, or livestock that must be fed, Where is the property?

or a building that needs urgent repairs?

Number, Street, City, State & Zip Code

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Debtor 1 Dell, Victoria Lynn Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

15. Tell the court whether you have received a briefing about credit counseling.

> The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days. I am not required to receive a briefing about

credit counseling because of:

П Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Deb	tor 1 Dell, Victoria Lynı	า		Case	number (if know	(n)
Part	6: Answer These Question	ons for Re	porting Purposes			
16.	What kind of debts do you have?	16a.	Are your debts primarily consun individual primarily for a personal, fa		re defined in 1	1 U.S.C.§ 101(8) as "incurred by an
			☐ No. Go to line 16b.			
			Yes. Go to line 17.			
		16b.	Are your debts primarily business for a business or investment or thro			
			☐ No. Go to line 16c.			
			☐ Yes. Go to line 17.			
		16c.	State the type of debts you owe that	are not consumer debts or bu	siness debts	
17.	Are you filing under Chapter 7?	□ No.	I am not filing under Chapter 7. Go	to line 18.		
	Do you estimate that after any exempt property is excluded and	■ Yes.	I am filing under Chapter 7. Do you paid that funds will be available to d			luded and administrative expenses are
	administrative expenses are paid that funds will be		■ No			
а	available for distribution to unsecured creditors?		☐ Yes			
18.	How many Creditors do you estimate that you	1 -49		☐ 1,000-5,000		25,001-50,000
	owe?	☐ 50-99 ☐ 100-19	20	☐ 5001-10,000 ☐ 10,001-25,000		☐ 50,001-100,000 ☐ More than100,000
		200-99		.,		
19.	How much do you estimate your assets to	■ \$0 - \$5	· ·	□ \$1,000,001 - \$10 million		□ \$500,000,001 - \$1 billion
	be worth?		01 - \$100,000 001 - \$500,000	□ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million		☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion
			001 - \$500,000 001 - \$1 million	□ \$100,000,001 - \$500 milli		☐ More than \$50 billion
20.	How much do you estimate your liabilities to	□ \$0 - \$5		□ \$1,000,001 - \$10 million		□ \$500,000,001 - \$1 billion
	be?		01 - \$100,000	□ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million		☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion
			001 - \$500,000 001 - \$1 million	□ \$100,000,001 - \$500 milli		☐ More than \$50 billion
Part	7: Sign Below					
For	you	I have exa	amined this petition, and I declare un	der penalty of perjury that the ir	nformation prov	ided is true and correct.
			chosen to file under Chapter 7, I am ode. I understand the relief available of			Chapter 7, 11,12, or 13 of title 11, Unitedunder Chapter 7.
			ney represents me and I did not pay ined and read the notice required by		s not an attorne	ey to help me fill out this document, I
		I request	relief in accordance with the chapte	er of title 11, United States Coo	de, specified in	this petition.
		case can	and making a false statement, conce result in fines up to \$250,000, or imporia Lynn Dell			by fraud in connection with a bankruptcy .C. §§ 152, 1341, 1519, and 3571.
		Victoria	Lynn Dell e of Debtor 1	Signature o	f Debtor 2	
		Executed	on June 11, 2019 MM / DD / YYYY	Executed or	MM / DD /	YYYY

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Debtor 1 Dell, Victoria Lynn Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Scot L. Wiggins	Date	June 11, 2019	
Signature of Attorney for Debtor		MM / DD / YYYY	
Scot L. Wiggins			
Printed name			
Baehr Wiggins, PC			
Firm name			
1900 N Providence Rd # 205			
Columbia, MO 65202-3710			
Number, Street, City, State & ZIP Code			
Operator to the control of the contr	For all address	and Obach muinging ages	
Contact phone (573) 499-1310	Email address	scot@baehrwiggins.com	
51241			
Bar number & State			

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B2030 (Form 2030) (12/15)

United States Bankruptcy Court Western District of Missouri, Jefferson City Division

In re	Dell, Victoria Lynn		Case No.		
		Debtor(s)	Chapter	7	
	DISCLOSURE OF COMPEN	NSATION OF ATT	ORNEY FOR D	EBTOR	
C	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(compensation paid to me within one year before the filing per rendered on behalf of the debtor(s) in contemplation of	of the petition in bankrupto	cy, or agreed to be paid	d to me, for services r	
	For legal services, I have agreed to accept		\$	1,200.00	
	Prior to the filing of this statement I have received			1,200.00	
	Balance Due		\$	0.00	
2. 7	The source of the compensation paid to me was:				
	■ Debtor □ Other (specify):				
3. 7	The source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
4.	■ I have not agreed to share the above-disclosed competer firm.	nsation with any other perso	on unless they are men	nbers and associates o	f my law
	☐ I have agreed to share the above-disclosed compensations copy of the agreement, together with a list of the name				law firm. A
5.	In return for the above-disclosed fee, I have agreed to ren	der legal service for all asp	ects of the bankruptcy	case, including:	
t c	a. Analysis of the debtor's financial situation, and rendering. Preparation and filing of any petition, schedules, stater Representation of the debtor at the meeting of creditors [Other provisions as needed]	nent of affairs and plan whi	ich may be required;	•	cruptey;
6. I	By agreement with the debtor(s), the above-disclosed fee Representation in any adversary proceed				
	certify that the foregoing is a complete statement of any ankruptcy proceeding.	CERTIFICATION agreement or arrangement	for payment to me for	representation of the	debtor(s) in
	une 11, 2019 ate	/s/ Scot L. Wigg Scot L. Wiggins Signature of Attorn Baehr Wiggins,	ney		_
		1900 N Provider Columbia, MO 6 (573) 499-1310 scot@baehrwig Name of law firm	5202-3710		_

Accounts Management Services PO Box 973 Columbia, MO 65205-0973

Alliance Radiology PO Box 3178 Indianapolis, IN 46206-3178

AT&T
Attn: Bankruptcy
208 S Akard St
Dallas, TX 75202-4295

Caine & Weiner
PO Box 5010
Woodland Hills, CA 91365-5010

Cameron Regional Medical Center 1600 E Evergreen St Cameron, MO 64429-2400

Carroll County Memorial Hospital 1502 N Jefferson St Carrollton, MO 64633-1948

Cash Net USA 175 W Jackson Blvd Ste 1000 Chicago, IL 60604-2863

Charter Communications 12405 Powerscourt Dr Saint Louis, MO 63131-3673 Columbia Orthopaedic Group 1 South Keene Street Columbia, MO 65201

Dollar Rent A Car 4358 Cypress Rd Saint Louis, MO 63101

Enhanced Recovery PO Box 57547 Jacksonville, FL 32241-7547

Federal Loan Servicing Credit PO Box 60610 Harrisburg, PA 17106-0610

Fidelity Collections 885 S Sawburg Ave Ste 103 Alliance, OH 44601-5905

First Federal Credit Control 2470 Chagrin Blvd Ste 205 Beachwood, OH 44122-5630

Hedrick Medical Center 2799 N Washington St Chillicothe, MO 64601-2902

IC Systems
PO Box 64378
Saint Paul, MN 55164-0378

Kirksville Medical Imaging, Inc. PO Box 78189 Saint Louis, MO 63178-8189

Mariner Finance 8211 Town Center Dr Nottingham, MD 21236-5904

Mediacom 1211 Wilkes Blvd Columbia, MO 65201-4760

Ohio Edison PO Box 3687 Akron, OH 44309-3687

Penn Credit Corporation 916 S 14th St Harrisburg, PA 17104-3425

Pershing Memorial Hospital PO Box 408 Brookfield, MO 64628-0408

Portfolio Recovery Associates 120 Corporate Blvd Ste 100 Norfolk, VA 23502-4952

Preferred Bank 1719 N Missouri Ave Marceline, MO 64658-1013 Progressive Insurance 6300 Wilson Mills Rd Cleveland, OH 44143-2109

Regency Finance PO Box 26406 Akron, OH 44319-6406

T-Mobile PO Box 37380 Albuquerque, NM 87176-7380

William Francis Whealen Jr. 11970 Borman Dr Ste 250 Saint Louis, MO 63146-4153

Case 19-20586-drd7 Doc 1 Filed 06/26/19 Entered 06/26/19 15:21:28 Desc Main Document Page 13 of 55 United States Bankruptcy Court Western District of Missouri, Jefferson City Division

IN RE:		Case No
Dell, Victoria Lynn		Chapter 7
	Debtor(s)	
	VERIFICATION OF MAILI	NG MATRIX
* *	hereby verifies that the attached list of creddress of my ex-spouse (if any).	editors is true and correct to the best of my knowledge
Date: June 11, 2019	/s/ Victoria Lynn Dell	
	Debtor	
	Joint Debtor, if any	

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Fill in th	his information to identi	fy your case:		
Debtor 1	Victoria Lynn De	II		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	WESTERN DISTRICT O	OF MISSOURI, JEFFERSON (CITY
Case number (if known)				

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information 12/15 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct

page 1 of 2

info	promation. Fill out all of your schedules first; then complete the information on this form. If you are filing amended or original forms, you must fill out a new Summary and check the box at the top of this page.		
Pai	rt 1: Summarize Your Assets		
		Your a	ssets f what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	4,991.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	4,991.00
Pai	rt 2: Summarize Your Liabilities		
			abilities t you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column AAmount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	900.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e &chedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j &chedule E/F	\$	74,165.00
	Your total liabilities	\$	75,065.00
Pai	rt 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income(Official Form 106I) Copy your combined monthly income from line 12 oSchedule I	\$	3,423.65
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	3,405.00
Pai	rt 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other.	ner schedu	les.
7.	■ Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a per purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C§ 159.	ersonal, far	nily, or household
	Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box court with your other schedules.	x and subr	nit this form to the

Official Form 106Sum

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Debtor 1 Dell, Victoria Lynn Case number (if known)

8.	From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form
	122A-1 Line 11: OR . Form 122B Line 11: OR . Form 122C-1 Line 14.

\$ 4,610.67

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total claim	
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

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		Document	Page 16 of 55		
Fill in thi	is information to identi	fy your case and this filing:			
Debtor 1	Victoria Lynn Do	. II			
Debior 1	Victoria Lynn De	Middle Name	Last Name		
Debtor 2					
(Spouse, if filing)	First Name	Middle Name	Last Name		
United States Bar	nkruptcy Court for the:	WESTERN DISTRICT OF MISS DIVISION	OURI, JEFFERSON CITY		
Coop number					П о
Case number _					Check if this is an amended filing
Official Fo	rm 106A/B				
Schedul	e A/B: Prop	ertv			12/15
hink it fits best. Be nformation. If more Answer every quest	e as complete and accura e space is needed, attach tion.	e items. List an asset only once. If a te as possible. If two married people a separate sheet to this form. On the g. Land, or Other Real Estate You Ov	e are filing together, both are e top of any additional pages	equally responsible for sup	oplying correct
December 1	Lacin Recordence, Banding	,, Land, or Other Roar Estato Fou Of	THE STREET OF THE STREET OF THE		
. Do you own or h	ave any legal or equitable	e interest in any residence, building,	land, or similar property?		
■ No. Go to Part	t 2.				
☐ Yes. Where is					
— 100. Whole is	s the property .				
Part 2: Describe	Your Vehicles				
o vou own. leas	se. or have legal or egu	itable interest in any vehicles, w	hether they are registered	d or not? Include any vehi	cles you own that
		, also report it on <i>Schedule G: Exe</i>			oloo you omi mac
Core vene tri	icks tractors sport ut	ility vahialas, mataravalas			
. Cars, varis, tru	icks, tractors, sport ut	ility vehicles, motorcycles			
□ No					
■ Yes					
3.1 Make: (Chevrolet	Who has an interest in th	e property? Check one	Do not deduct secured cl	
-	Chevrolet Cobalt		ne property? Check one	the amount of any secure	aims or exemptions. Put ed claims on <i>Schedule D:</i> ims Secured by Property.
Model:		Debtor 1 only	ne property? Check one	the amount of any secure Creditors Who Have Clair	ed claims on Schedule D: ims Secured by Property.
Model:	Cobalt 2008		,	the amount of any secure	ed claims on Schedule D:
Model: Year:	Cobalt 2008 e mileage:	■ Debtor 1 only □ Debtor 2 only	only	the amount of any secure Creditors Who Have Clai Current value of the	ed claims on Schedule D: ims Secured by Property. Current value of the
Model: Year: Approximate	Cobalt 2008 e mileage:	Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2	only tors and another	the amount of any secure Creditors Who Have Clai Current value of the	ed claims on Schedule D: ims Secured by Property. Current value of the
Model: Year: Approximate	Cobalt 2008 e mileage:	Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 At least one of the debt	only tors and another	the amount of any secure Creditors Who Have Clair Current value of the entire property?	ed claims on Schedule D: ims Secured by Property. Current value of the portion you own?
Model: Year: 2 Approximate Other inform	Cobalt 2008 e mileage: nation:	Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 At least one of the debtor 1 Check if this is common (see instructions)	only tors and another nunity property cles, other vehicles, and ac	the amount of any secure Creditors Who Have Clair Current value of the entire property? \$1,000.00	ed claims on Schedule D: ims Secured by Property. Current value of the portion you own?
Model: Year: 2 Approximate Other inform	Cobalt 2008 e mileage: nation:	Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 At least one of the debt Check if this is comm (see instructions)	only tors and another nunity property cles, other vehicles, and ac	the amount of any secure Creditors Who Have Clair Current value of the entire property? \$1,000.00	ed claims on Schedule D: ims Secured by Property. Current value of the portion you own?
Model: Year: 2 Approximate Other inform	Cobalt 2008 e mileage: nation:	Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 At least one of the debtor 1 Check if this is common (see instructions)	only tors and another nunity property cles, other vehicles, and ac	the amount of any secure Creditors Who Have Clair Current value of the entire property? \$1,000.00	ed claims on Schedule D: ims Secured by Property. Current value of the portion you own?
Model: Year: 2 Approximate Other inform Watercraft, air Examples: Boats	Cobalt 2008 e mileage: nation:	Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 At least one of the debtor 1 Check if this is common (see instructions)	only tors and another nunity property cles, other vehicles, and ac	the amount of any secure Creditors Who Have Clair Current value of the entire property? \$1,000.00	ed claims on Schedule D: ims Secured by Property. Current value of the portion you own?
Model: Year: 2 Approximate Other inform Watercraft, air Examples: Boat:	Cobalt 2008 e mileage: nation:	Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 At least one of the debtor 1 Check if this is common (see instructions)	only tors and another nunity property cles, other vehicles, and ac	the amount of any secure Creditors Who Have Clair Current value of the entire property? \$1,000.00	ed claims on Schedule D: ims Secured by Property. Current value of the portion you own?
Model: Year: 2 Approximate Other inform Watercraft, air Examples: Boat:	Cobalt 2008 e mileage: nation:	Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 At least one of the debtor 1 Check if this is common (see instructions)	only tors and another nunity property cles, other vehicles, and ac	the amount of any secure Creditors Who Have Clair Current value of the entire property? \$1,000.00	ed claims on Schedule D: ims Secured by Property. Current value of the portion you own?
Model: Year: Approximate Other inform Watercraft, air Examples: Boats No Yes	Cobalt 2008 e mileage: nation: craft, motor homes, A' s, trailers, motors, perso	Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 At least one of the debtor 1 Check if this is common (see instructions)	only tors and another aunity property cles, other vehicles, and access wmobiles, motorcycle access	the amount of any secure Creditors Who Have Clai Current value of the entire property? \$1,000.00 ccessories sories	ed claims on Schedule D: ms Secured by Property. Current value of the portion you own? \$1,000.00
Model: Year: Approximate Other inform Watercraft, air Examples: Boats No Yes Add the dollar	Cobalt 2008 e mileage: nation: craft, motor homes, A' s, trailers, motors, perso	Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 At least one of the debtor 2 Check if this is comm (see instructions) TVs and other recreational vehicular watercraft, fishing vessels, snow	only tors and another aunity property cles, other vehicles, and access wmobiles, motorcycle access	the amount of any secure Creditors Who Have Clai Current value of the entire property? \$1,000.00 ccessories sories	ed claims on Schedule D: ims Secured by Property. Current value of the portion you own?
Model:	Cobalt 2008 e mileage: nation: craft, motor homes, A's, trailers, motors, person r value of the portion yeighed for Part 2. Write	Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 At least one of the debtor 2 Check if this is comm (see instructions) TVs and other recreational vehice and watercraft, fishing vessels, snow that number here	only tors and another aunity property cles, other vehicles, and access wmobiles, motorcycle access	the amount of any secure Creditors Who Have Clai Current value of the entire property? \$1,000.00 ccessories sories	ed claims on Schedule D: ms Secured by Property. Current value of the portion you own? \$1,000.00
Model: 4 Year: 2 Approximate Other inform Watercraft, air Examples: Boat: No Yes Add the dollar you have atta	Cobalt 2008 e mileage: nation: craft, motor homes, A's, trailers, motors, person r value of the portion yeched for Part 2. Write	Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 At least one of the debtor 2 Check if this is comm (see instructions) TVs and other recreational vehice and watercraft, fishing vessels, snow that number here	only tors and another nunity property cles, other vehicles, and ac wmobiles, motorcycle access	the amount of any secure Creditors Who Have Clair Current value of the entire property? \$1,000.00 Ccessories Sories entries for pages	ed claims on Schedule D: ms Secured by Property. Current value of the portion you own? \$1,000.00

Official Form 106A/B Schedule A/B: Property page 1

claims or exemptions.

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De	ebtor 1	Dell, Victori	a Lynn Case number (if known)	
		old goods and for es: Major appliand	urnishings ces, furniture, linens, china, kitchenware	
	■ Yes.	Describe	Household Goods, Furnishings & Appliances	\$1,800.00
	Electroni Example	es: Televisions ar	nd radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collect phones, cameras, media players, games	tions; electronic devices
		Describe	Personal & Household Electronics	\$500.00
	Example No		figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or be nemorabilia, collectibles	paseball card collections; other
	Example No	ent for sports ares: Sports, photoginstruments Describe	nd hobbies graphic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and l	kayaks; carpentry tools; musical
10.	Firearm Examp ■ No	ıs	s, shotguns, ammunition, and related equipment	
	□ No É	oles: Everyday clo	othes, furs, leather coats, designer wear, shoes, accessories	
	■ Yes.	Describe	Clothing	\$200.00
	□ No		velry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold,	silver
			Misc. Women's Jewelry	\$50.00
			Wedding Ring	\$50.00
14.	Examp No Yes. Any oth No	m animals ples: Dogs, cats, l Describe ner personal and Give specific info	d household items you did not already list, including any health aids you did not list	
15.			of all of your entries from Part 3, including any entries for pages you have attached for nber here	\$2,600.00

Part 4: Describe Your Financial Assets

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De	ebtor 1	Dell, Victo	ria Lynn			Case number (if known)	
Do	you ow	vn or have any	legal or ed	uitable interest in any o	of the following?		Current value of the portion you own? Do not deduct secured claims or exemptions.
16.	□ No			r wallet, in your home, in a	a safe deposit box, and on hand		
						Cash on hand	\$3.00
17.	Examp	0.	•	-	certificates of deposit; shares in the same institution, list each. Institution name:	credit unions, brokerage house	s, and other similar
	— 165						
			17.1.	Checking Account	at Bank of Brookfield-P	Purdin	\$1,388.00
	Examp ■ No		s, investmer	r traded stocks at accounts with brokerage	e firms, money market accounts	S	
	Non-pu		stock and i	nterests in incorporated	and unincorporated busines	sses, including an interest in	an LLC, partnership, and
	■ No						
	☐ Yes.	Give specific		about them ne of entity:		% of ownership:	
	Negotia Non-ne	iable instrumen	ts include per ments are the formation al	rsonal checks, cashiers' ose you cannot transfer to	e and non-negotiable instrum checks, promissory notes, and r o someone by signing or deliveri	money orders.	
	Examp ■ No	ment or pension of the second	n IRA, ERIS unt separate	A, Keogh, 401(k), 403(b)), thrift savings accounts, or oth	ner pension or profit-sharing pla	ns
	Your sh Examp ■ No	oles: Agreemen	d prepayme	ents you have made so that yo	ou may continue service or use f utilities (electric, gas, water), tel	ecommunications companies, o	r others
	☐ Yes				Institution name or individua	l:	
	■ No	`	·		u, either for life or for a number	of years)	
	☐ Yes			e and description.			
	26 U.S.0 ■ No	C. §§ 530(b)(1)	, 529A(b), a	nd 529(b)(1).	ed ABLE program, or under a		n.
	☐ Yes		Institution n	ame and description. Sep	parately file the records of any int	terests.11 U.S.C. § 521(c):	
25.	Trusts, ■ No	, equitable or f	uture inter	ests in property (other t	han anything listed in line 1),	, and rights or powers exercis	able for your benefit

Official Form 106A/B Schedule A/B: Property page 3

☐ Yes. Give specific information about them...

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Case number (if known)

DU	DiOI I	Deli, Victoria Lyriii	
	Exam _l	s, copyrights, trademarks, trade secrets, and other intellectual property oles: Internet domain names, websites, proceeds from royalties and licensing agreements	
	■ No □ Yes.	Give specific information about them	
27.		es, franchises, and other general intangibles bles: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses	
	■ No		
	☐ Yes.	Give specific information about them	
Mc	oney or	property owed to you?	Current value of the portion you own? Do not deduct secured claims or exemptions.
	_	unds owed to you	
	■ No □ Yes.	Give specific information about them, including whether you already filed the returns and the tax years	
		support oles: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property se	ettlement
		Give specific information	
	Exam	imounts someone owes you oles: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensatio unpaid loans you made to someone else	n, Social Security benefits;
	■ No □ Yes.	Give specific information	
	Interes Examp □ No	ts in insurance policies bles: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance	
	Yes.	Name the insurance company of each policy and list its value.	Common day on referred
		Company name: Beneficiary:	Surrender or refund value:
		Term Life Insurace Through Employer	\$0.00
32.		erest in property that is due you from someone who has died are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive proceeds.	operty because someone has
	■ No □ Yes.	Give specific information	
		against third parties, whether or not you have filed a lawsuit or made a demand for payment oles: Accidents, employment disputes, insurance claims, or rights to sue	
		Describe each claim	
	Other o	contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to se	t off claims
	☐ Yes.	Describe each claim	
	Any fir ■ No	ancial assets you did not already list	
	☐ Yes.	Give specific information	
36.		he dollar value of all of your entries from Part 4, including any entries for pages you have attached for I. Write that number here	\$1,391.00

Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.

Case 19-20586-drd7 Doc 1 Filed 06/26/19 Entered 06/26/19 15:21:28 Page 20 of 55 Document Case number (if known) Debtor 1 Dell, Victoria Lynn 37. Do you own or have any legal or equitable interest in any business-related property? No. Go to Part 6. ☐ Yes. Go to line 38. Part 6 Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. ☐ Yes. Go to line 47. Describe All Property You Own or Have an Interest in That You Did Not List Above Part 7: 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership ☐ Yes. Give specific information....... 54. Add the dollar value of all of your entries from Part 7. Write that number here \$0.00 List the Totals of Each Part of this Form 55. Part 1: Total real estate, line 2 \$0.00 Part 2: Total vehicles, line 5 56. \$1,000.00 Part 3: Total personal and household items, line 15 57. \$2,600.00 Part 4: Total financial assets, line 36 58. \$1,391.00 59. Part 5: Total business-related property, line 45 \$0.00 Part 6: Total farm- and fishing-related property, line 52 60. \$0.00 Part 7: Total other property not listed, line 54 \$0.00 Total personal property. Add lines 56 through 61... Copy personal property total \$4,991.00 \$4,991.00

\$4,991.00

Official Form 106A/B Schedule A/B: Property page 5

63. Total of all property on Schedule A/B. Add line 55 + line 62

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Fill in th	nis information to identif	y your case:		
Debtor 1	Victoria Lynn De		Last Name	
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	WESTERN DISTRICT (OF MISSOURI, JEFFERSON	CITY
Case number (if known)				☐ Check if this is
				amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1:	Identify the Pr	operty You	Claim as Exempt

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filling with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Am	ount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
Chevrolet Cobalt	\$1,000.00		\$1,000.00	RSMo § 513.430.1(5)
2008 Line from Schedule A/B: 3.1			100% of fair market value, up to any applicable statutory limit	
Household Goods, Furnishings & Appliances	\$1,800.00		\$1,800.00	RSMo § 513.430.1(1)
Line from Schedule A/B: 6.1			100% of fair market value, up to any applicable statutory limit	
Personal & Household Electronics Line from Schedule A/B 7.1	\$500.00		\$500.00	RSMo § 513.430.1(1)
Line Holli Schedule A/L 1.1			100% of fair market value, up to any applicable statutory limit	
Clothing Line from Schedule A/B 11.1	\$200.00		\$200.00	RSMo § 513.430.1(1)
Line Holli Schedule A/L 11.1			100% of fair market value, up to any applicable statutory limit	
Misc. Women's Jewelry Line from Schedule A/B 12.1	\$50.00		\$50.00	RSMo § 513.430.1(2)
Line nom ouredule A/D. 12.1			100% of fair market value, up to any applicable statutory limit	

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Debtor 1	Dell, Victoria Lynn			Case number (if known)	
	ef description of the property and line on nedule A/B that lists this property	Current value of the portion you own	Amo	Specific laws that allow exemption	
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
	edding Ring e from Schedule A/B: 12.2	\$50.00		\$50.00	RSMo § 513.430.1(2)
				100% of fair market value, up to any applicable statutory limit	
	sh on hand e from Schedule A/B 16.1	\$3.00		\$3.00	RSMo § 513.430.1(3)
LIII	e nom scredule A/B. 19.1			100% of fair market value, up to any applicable statutory limit	
	Bank of Brookfield-Purdin e from Schedule A/B 17.1	\$1,388.00		\$1,250.00	RSMo § 513.440
LIII	e IIOIII S <i>Criedule A/B.</i> 17.1			100% of fair market value, up to any applicable statutory limit	
	Bank of Brookfield-Purdin	\$1,388.00		\$138.00	RSMo § 513.430.1(3)
LIII	e nom scredule A/B. 11.1			100% of fair market value, up to any applicable statutory limit	
	e you claiming a homestead exemption ubject to adjustment on 4/01/22 and every 3			on or after the date of adjustment.)	
	Yes. Did you acquire the property covered No	ed by the exemption within	า 1,21	5 days before you filed this case?	
	Π Yes				

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	<u>Document</u> Pa	<u>age 23 o</u>	of 55		
Fill in this information to ide	ntify your case:				
Debtor 1 Victoria Lynn	Dell				
First Name		st Name			
Debtor 2					
(Spouse if, filing) First Name	Middle Name Las	st Name			
United States Bankruptcy Court for the	WESTERN DISTRICT OF MISSOU DIVISION	IRI, JEFFER	RSON CITY		
Case number					
(if known)				☐ Check	if this is an
				amend	ded filing
Official Form 106D					
		ام مسید	las i Duana ant		
Schedule D: Creditor	s Who Have Claims Se	<u>curea</u>	by Propert	У	12/15
	. If two married people are filing together, bo ut, number the entries, and attach it to this fo				
Do any creditors have claims secured I	by your property?				
☐ No. Check this box and submit t	this form to the court with your other schedu	ules. You ha	ve nothing else to re	port on this form.	
Yes. Fill in all of the information	below.				
Part 1: List All Secured Claims					
2. List all secured claims. If a creditor has	more than one secured claim, list the creditor s	separately	Column A	Column B	Column C
	as a particular claim, list the other creditors in Patical order according to the creditor 's name.	art 2. As	Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
2.1 Preferred Bank	Describe the property that secures the cl	laim:	\$900.00	\$1,000.00	\$0.00
Creditor's Name	2008 Chevrolet Cobalt				
4740 NI Mico curi Aug					
1719 N Missouri Ave Marceline, MO	As of the date you file, the claim is: Check	call that			
64658-1013	apply. Contingent				
Number, Street, City, State & Zip Code	☐ Unliquidated				
, , , , , , , , , , , , , , , , , , , ,	☐ Disputed				
Who owes the debt? Check one.	Nature of lien. Check all that apply.				
Debtor 1 only	■ An agreement you made (such as mortg	lage or secure	ed.		
Debtor 2 only	car loan)	ago or occur			
Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic	ic's lian)			
☐ At least one of the debtors and another	☐ Judgment lien from a lawsuit	US IIEII)			
☐ Check if this claim relates to a	<u> </u>				
community debt	Other (including a right to offset)				
Date debt was incurred	Last 4 digits of account number				
Add the dollar value of your entries in Co	olumn A on this page. Write that number her	re:	\$900	.00	
If this is the last page of your form, add			\$900	_	
Write that number here:			4300		

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

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			L	Jocument	Page 24	+ 01 55		
Fill in	this inform	nation to identify you	r case:					
Debtor 1		Victoria Lynn Del	ı					
		First Name	Middle N	ame	Last Name)	
Debtor 2								
(Spouse if,	filing)	First Name	Middle Na	ame	Last Name			
United S	tates Bankı	ruptcy Court for the:	WESTERN DIVISION	DISTRICT OF MI	SSOURI, JEFI	ERSON CITY		
Case nu	mber						i	
(if known)				=				Check if this is an
								amended filing
O#:-:-	I =	400E/E						
	l Form							40/45
		: Creditors W					s with NONPRIORITY clair	12/15
Schedule D: Credito the Contin	G: Executor ors Who Have nuation Page ber (if know	y Contracts and Unexp e Claims Secured by Pr to this page. If you hav	red Leases (Off operty. If more re no information	ficial Form 106G). I space is needed, c on to report in a Pa	Do not include a copy the Part yo	ny creditors with u need, fill it out,		that are listed in Schedule boxes on the left. Attach
		have priority unsecure						
■ No	o. Go to Part	2.	_					
□ Ye								
	53.							
Part 2:	List All o	f Your NONPRIORIT	/ Unsecured	Claims				
3. Do ar	ny creditors	have nonpriority unsec	ured claims ag	ainst you?				
□ No	o. You have i	nothing to report in this pa	art. Submit this fo	orm to the court with	your other sche	dules.		
■ Ye	es.							
unsed	cured claim, I	ist the creditor separately	for each claim.	For each claim listed	d, identify what ty	pe of claim it is. D	If a creditor has more that not list claims already incursecured claims fill out the	luded in Part 1. If more
								Total claim
4.1	Accounts	Management Ser	vices	Last 4 digits of ac	count number	5600		\$2,000.00
		reditor's Name				0047		
	PO Box 9	73		When was the deb	ot incurred?	2017		_
		, MO 65205-0973						
		et City State Zip Code	-	As of the date you	ı file, the claim i	s: Check all that a	apply	
'	Who incurre	d the debt? Check one.						
I	Debtor 1	only		☐ Contingent				
I	Debtor 2	only		☐ Unliquidated				
I	Debtor 1 a	and Debtor 2 only		☐ Disputed				
ı	At least or	ne of the debtors and and	other	Type of NONPRIO	RITY unsecured	l claim:		
ı	☐ Check if t	his claim is for a comr	nunity	☐ Student loans				
(debt	subject to offset?	•	☐ Obligations aris report as priority cla		ration agreement	or divorce that you did not	
- 1	No			☐ Debts to pensio	n or profit-sharin	g plans, and other	similar debts	
ı	☐ Yes			Other. Specify				
				. ,				_

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Debtor	1 Dell, Victoria Lynn		Case number (f known)			
4.2	Alliance Radiology Nonpriority Creditor's Name	Last 4 digits of account number	1219	\$50.00		
	PO Box 3178	When was the debt incurred?	2017			
	Indianapolis, IN 46206-3178 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply			
	■ Debtor 1 only □ Debtor 2 only	☐ Contingent☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecure	d claim:			
	☐ Check if this claim is for a community debt Is the claim subject to offset? ■ No	Student loans	ration agreement or divorce that you did not			
	Yes	Other. Specify				
4.3	Caine & Weiner Nonpriority Creditor's Name	Last 4 digits of account number	7300	\$0.00		
-	PO Box 5010 Woodland Hills, CA 91365-5010	When was the debt incurred?	2016			
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply			
	■ Debtor 1 only □ Debtor 2 only	☐ Contingent ☐ Unliquidated				
	Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecure	d aleim.			
	☐ At least one of the debtors and another ☐ Check if this claim is for a community debt Is the claim subject to offset?	Student loans Obligations arising out of a separeport as priority claims				
	No	Debts to pension or profit-sharing	g plans, and other similar debts			
	Yes	Other. Specify				
4.4	Cameron Regional Medical Center Nonpriority Creditor's Name	Last 4 digits of account number	3340	\$3,200.00		
	1600 E Evergreen St Cameron, MO 64429-2400	When was the debt incurred?	2018			
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply			
	Debtor 1 only	Contingent				
	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	☐ Unliquidated ☐ Disputed				
	☐ At least one of the debtors and another☐ Check if this claim is for a community debt	Type of NONPRIORITY unsecured ☐ Student loans ☐ Obligations arising out of a separations.	d claim: ration agreement or divorce that you did not			
	Is the claim subject to offset? ■ No	report as priority claims Debts to pension or profit-sharin	,			
	□Yes	Other Specify				

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Debto	r 1 Dell, Victoria Lynn		Case number (if known)	
4.5	Carroll County Memorial Hospital	Last 4 digits of account number	1387	\$100.00
	Nonpriority Creditor's Name	When was the debt incurred?	2017	
	1502 N Jefferson St Carrollton, MO 64633-1948 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim		
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify		
4.6	Cash Net USA	Last 4 digits of account number	5698	\$2,500.00
	Nonpriority Creditor's Name	When was the debt incurred?	2018	
	175 W Jackson Blvd Ste 1000 Chicago, IL 60604-2863 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim		
	■ Debtor 1 only			
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt	Student loans		
	Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify		
4.7	Columbia Orthopaedic Group Nonpriority Creditor's Name	Last 4 digits of account number	9504	\$645.00
		When was the debt incurred?	2018	
	1 South Keene Street			
	Columbia, MO 65201 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	∏ Yes	Other Specific		

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Debto	r 1 Dell, Victoria Lynn		Case number (if known)					
4.8	Dollar Rent A Car Nonpriority Creditor's Name	Last 4 digits of account number	NA	\$0.00				
	4358 Cypress Rd	When was the debt incurred?	2018					
	Saint Louis, MO 63101 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply					
	■ Debtor 1 only □ Debtor 2 only	☐ Contingent☐ Unliquidated						
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim is for a community debt		d claim: ration agreement or divorce that you did not					
	Is the claim subject to offset? ■ No □ Yes	report as priority claims Debts to pension or profit-sharin						
	i res	Other. Specify						
4.9	Enhanced Recovery Nonpriority Creditor's Name	Last 4 digits of account number	2014	\$205.00				
	PO Box 57547 Jacksonville, FL 32241-7547	When was the debt incurred?	2018					
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply					
		■ Debtor 1 only □ Contingent						
	☐ Debtor 2 only	Unliquidated						
	Debtor 1 and Debtor 2 only	Disputed	d alata.					
	☐ At least one of the debtors and another ☐ Check if this claim is for a community debt	Type of NONPRIORITY unsecured Student loans						
	Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims ☐ Debts to pension or profit-sharin	ration agreement or divorce that you did not					
	☐ Yes		g pane, and outsi onimal dools					
4.10	Federal Loan Servicing Credit Nonpriority Creditor's Name	Last 4 digits of account number	3458	\$51,000.00				
	PO Box 60610	When was the debt incurred?	2015					
	Harrisburg, PA 17106-0610 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply					
	Debtor 1 only	☐ Contingent						
	Debtor 2 only	☐ Unliquidated						
	☐ Debtor 1 and Debtor 2 only	☐ Disputed						
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured						
	☐ Check if this claim is for a community debt		ration agreement or divorce that you did not					
	Is the claim subject to offset?	report as priority claims						
	No	Debts to pension or profit-sharing	g plans, and other similar debts					
	☐ Yes	Other Specify						

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Debtor	1 Dell, Victoria Lynn		Case number (if known)	
4.11	Fidelity Collections Nonpriority Creditor's Name	Last 4 digits of account number	4912	\$1,100.00
	885 S Sawburg Ave Ste 103	When was the debt incurred?	2018	
	Alliance, OH 44601-5905 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only □ Debtor 2 only	☐ Contingent☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim is for a community debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
	■ No □ Yes	☐ Debts to pension or profit-sharin ☐ Other. Specify	g plans, and other similar debts	
4.12	First Federal Credit Control Nonpriority Creditor's Name	Last 4 digits of account number	1673	\$2,235.00
	2470 Chagrin Blvd Ste 205 Beachwood, OH 44122-5630	When was the debt incurred?	2013	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	■ Debtor 1 only □ Debtor 2 only			
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Disputed Type of NONPRIORITY unsecured ☐ Student loans ☐ Obligations arising out of a separeport as priority claims		
	■ No □ Yes	Debts to pension or profit-sharin	,	
1.10		· · · · · ·		44.050.00
4.13	Hedrick Medical Center Nonpriority Creditor's Name	Last 4 digits of account number	<u>1981</u>	\$1,050.00
	2799 N Washington St Chillicothe, MO 64601-2902 Number Street City State Zip Code	When was the debt incurred? As of the date you file, the claim		
	Who incurred the debt? Check one. Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	☐ Unliquidated☐ Disputed		
	☐ At least one of the debtors and another ☐ Check if this claim is for a community debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
	■ No □ Yes	☐ Debts to pension or profit-sharin ☐ Other Specify	g plans, and other similar debts	

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Debtor	1 Dell, Victoria Lynn		Case number (if known)	
4.14	IC Systems Nonpriority Creditor's Name	Last 4 digits of account number	7411	\$1,105.00
	PO Box 64378 Saint Paul, MN 55164-0378	When was the debt incurred?	2014	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a sepa	ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	and a ground of a control and you are not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify		
4.15	Kirksville Medical Imaging, Inc. Nonpriority Creditor's Name	Last 4 digits of account number	4505	\$100.00
		When was the debt incurred?	2017	
	PO Box 78189 Saint Louis, MO 63178-8189			
	Number Street City State Zip Code	As of the date you file, the claim		
	Who incurred the debt? Check one.	•	11,7	
	Debtor 1 only			
	Debtor 2 only	☐ Contingent☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	□ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify		
4.16	Mariner Finance	Last 4 digits of account number	3510	\$4,315.00
	Nonpriority Creditor's Name	When was the debt incurred?	2015	
	8211 Town Center Dr Nottingham, MD 21236-5904			
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt	Obligations arising out of a sepa		
	Is the claim subject to offset?	report as priority claims		
	■ No	Debts to pension or profit-sharin	g pians, and other similar debts	
	Yes	Other Specify		

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Debtor	1 Dell, Victoria Lynn		Case number (f known)	
4.17	Penn Credit Corporation Nonpriority Creditor's Name	Last 4 digits of account number	0111	\$2,145.00
	916 S 14th St	When was the debt incurred?	2017	
	Harrisburg, PA 17104-3425 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only □ Debtor 2 only	☐ Contingent☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim is for a community debt Is the claim subject to offset? ☐ No	☐ Disputed Type of NONPRIORITY unsecured ☐ Student loans ☐ Obligations arising out of a separeport as priority claims ☐ Debts to pension or profit-sharin	aration agreement or divorce that you did not	
	Yes	Other. Specify		
4.18	Portfolio Recovery Associates Nonpriority Creditor's Name	Last 4 digits of account number	5318	\$1,715.00
-	120 Corporate Blvd Ste 100 Norfolk, VA 23502-4952	When was the debt incurred?	2018	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community debt	Student loans	ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	- ·	
	■ No □ Yes	☐ Debts to pension or profit-sharin		
	Li res	Other. Specify		
4.19	Regency Finance Nonpriority Creditor's Name	Last 4 digits of account number		unknown
	PO Box 26406 Akron, OH 44319-6406	When was the debt incurred?		
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	☐ Unliquidated☐ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecured		
	☐ Check if this claim is for a community debt	Student loans	ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	□Yes	Other Specify		

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Debto	r 1 Dell, Victoria Lynn		Case number (f known)	
4.20	T-Mobile	Last 4 digits of account number	5073	\$700.00
	Nonpriority Creditor's Name	When was the debt incurred?	2018	
	PO Box 37380 Albuquerque, NM 87176-7380 Number Street City State Zip Code	As of the date you file, the claim		
	Who incurred the debt? Check one.	_		
	Debtor 1 only	Contingent		
	Debtor 2 only	Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a sep report as priority claims	aration agreement or divorce that you di	d not
	No	Debts to pension or profit-shari	ng plans, and other similar debts	
		·	ing plants, and other similar debts	
	Yes	Other. Specify		
Part 3	List Others to Be Notified About a De	ht That Var. Almanda Listad		
5. Use t is try have notif	this page only if you have others to be notified ying to collect from you for a debt you owe to se more than one creditor for any of the debts the ied for any debts in Parts 1 or 2, do not fill out and Address	about your bankruptcy, for a debt that yomeone else, list the original creditor ir at you listed in Parts 1 or 2, list the addi	Parts 1 or 2, then list the collection a tional creditors here. If you do not ha	gency here. Similarly, if you
AT&1		· · · · · · · · · · · · · · · · · · ·	☐ Part 1: Creditors with Priority Unsecur	ed Claims
	Bankruptcy		Part 2: Creditors with Nonpriority Unse	ecured Claims
	S Akard St		. ,	
Dalla	s, TX 75202-4295	Last 4 digits of account number	7411	
	and Address	On which entry in Part 1 or Part 2 did you		
-	ter Communications 5 Powerscourt Dr		Part 1: Creditors with Priority Unsecur	
_	t Louis, MO 63131-3673	•	Part 2: Creditors with Nonpriority Unse	ecured Claims
		Last 4 digits of account number	2014	
Name a	and Address	On which entry in Part 1 or Part 2 did you	u list the original creditor?	
	acom	Line 4.14 of (Check one):	Part 1: Creditors with Priority Unsecur	ed Claims
	Wilkes Blvd mbia, MO 65201-4760		Part 2: Creditors with Nonpriority Unse	ecured Claims
Colu	mbia, mo 63201-4760	Last 4 digits of account number	7411	
NI	and Address	On which cutorie Dort 4 on Dort O did you	. Heat the anniminal and disease	
	and Address Edison	On which entry in Part 1 or Part 2 did you Line 4.18 of (<i>Check one</i>):	I list the original creditor? I Part 1: Creditors with Priority Unsecur	ed Claims
-	Sox 3687	` '	Part 2: Creditors with Nonpriority Unse	
Akro	n, OH 44309-3687	Last 4 digits of account number	, ,	Source Glaime
		Last 4 digits of account number	5318	
	and Address	On which entry in Part 1 or Part 2 did you		
	hing Memorial Hospital lox 408		Part 1: Creditors with Priority Unsecur	
_	kfield, MO 64628-0408		Part 2: Creditors with Nonpriority Unse	ecured Claims
	,	Last 4 digits of account number	5600	
Name a	and Address	On which entry in Part 1 or Part 2 did you	Llist the original creditor?	
	ressive Insurance	· · · · · · · · · · · · · · · · · · ·	Part 1: Creditors with Priority Unsecur	ed Claims
	Wilson Mills Rd		Part 2: Creditors with Nonpriority Unse	ecured Claims
Cleve	eland, OH 44143-2109	Last 4 digits of account number	7300	
	and Address am Francis Whealen Jr.	On which entry in Part 1 or Part 2 did you Line 4.8 of (<i>Check one</i>):	ມ list the original creditor? ີ່⊒ Part 1: Creditors with Priority Unsecur	ad Claims
	0 Borman Dr Ste 250		_	
-	t Louis, MO 63146-4153		Part 2: Creditors with Nonpriority Unse	ecured Ciaims
		Last 4 digits of account number	NΑ	

Official Form 106 E/F

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Debtor 1 Dell, Victoria Lynn

Case number (if known)

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				7	Total Claim
	6a.	Domestic support obligations	6a.	\$	0.00
Total claims from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	· · —	
	OC.	Claims for death or personal injury write you were intoxicated	OC.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	0.00
				-	Total Claim
	6f.	Student loans	6f.	\$	0.00
Total claims					
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	74,165.00
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	74,165.00

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Fill in th	is information to identi	fy your case:	a.g. cc c	
		•		
Debtor 1	Victoria Lynn De			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	nkruptcy Court for the:	WESTERN DISTRICT O	OF MISSOURI, JEFFERSC	ON CITY
Case number				
(if known)				

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person o	r company with	whom you have the	e contract or lease	State what the contract or lease is for
	Name, Number	, Street, City, State and ZIF	Code	
Name				_
Niverbox	Otros			<u> </u>
Number	Street			
City		State	ZIP Code	
Name				<u> </u>
· taille				
Number	Street			_
City		State	7IP Code	<u> </u>
Oity		Oldic	Zii Oddo	
Name				
Niverber	Otrost			_
Number	Street			
City		State	ZIP Code	
Name				<u> </u>
Number	Street			_
Citv		State	ZIP Code	<u> </u>
Name				
Number	Street			_
Citv		State	ZIP Code	<u> </u>
	Name Number City Name Number City Name Number City Name City Name Number	Name Number Street City Name Number Street	Number Street City State Name Number Street Name Number Street City State	Number Street City State ZIP Code Name Number Street City State ZIP Code

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		Docume	nt Page 34 o	f 55	
Fill	I in this information to identify	your case:			
Debtor 1	Victoria Lynn Dell				
DODIO! 1	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing	ng) First Name	Middle Name	Last Name		
United Stat	tes Bankruptcy Court for the:	WESTERN DISTRICT (OF MISSOURI, JEFFER	SON CITY	
Case numb	per				
(if known)					☐ Check if this is an
					amended filing
Official	Form 106H				
		htoro			
Sched	ule H: Your Code	eptors			12/15
and number case number 1. Do y		he left. Attach the Additi uestion.	ional Page to this page.	On the top of any Add	opy the Additional Page, fill it out, ditional Pages, write your name and
■ No					
☐ Yes					
	nin the last 8 years, have you l nia, Idaho, Louisiana, Nevada, I				states and territories include Arizona,
■ No.	Go to line 3.				
☐ Yes.	. Did your spouse, former spouse	e, or legal equivalent live w	vith you at the time?		
line 2 a	again as a codebtor only if tha Schedule E/F (Official Form 1	nt person is a guarantor	or cosigner. Make sure	you have listed the cr	with you. List the person shown in reditor on Schedule D (Official Forn le E/F, or Schedule G to fill out
	Column 1: Your codebtor Name, Number, Street, City, State and ZIF	² Code		Column 2: The cre Check all schedule	ditor to whom you owe the debt es that apply:
3.1				☐ Schedule D, line	
	Name			Schedule E/F, I	
				☐ Schedule G, lin	
_	Number Street			_	
	City	State	ZIP Code		
3.2				☐ Schedule D, line	
	Name			_ ☐ Schedule E/F, I	
				☐ Schedule G, lin	
<u> </u>	Number Street			_	
	City	State	ZIP Code		

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Fill	in this information to identify your ca	se:				ı						
	otor 1 Victoria Lyn											
	otor 2				_							
Uni	ted States Bankruptcy Court for the:	WESTERN DISTRICT	Γ OF MISSOURI,	JEFFERSON								
	se number Jown)		-			□ A	k if this is n amende supplemencome as	ed f ent	showin			hapter 13
0	fficial Form 106I					N	1M / DD/ \	ΥΥ	Υ			
S	chedule I: Your Inco	ome										12/1
sup spo atta	s complete and accurate as possiplying correct information. If you ause. If you are separated and your ch a separate sheet to this form. Court 1: Describe Employment	are married and not filing spouse is not filing with	g jointly, and yo h you, do not in	ur spouse is clude informa	livir tior	ng with y n about y	ou, inclu our spou	de ise.	inform . If mor	ation abo	out yo	our eded,
1.	Fill in your employment information.		Debtor 1				Debtor 2	2 o	r non-f	iling spo	use	
	If you have more than one job,	Employment status*	■ Employed				☐ Empl	loye	ed			
	attach a separate page with information about additional	Employment status	☐ Not employ	ed			□ Not e	emp	loyed			
	employers.	Occupation	See Schedu	le Attached								
	Include part-time, seasonal, or self-employed work.	Employer's name	-									
	Occupation may include student o homemaker, if it applies.	Employer's address										
	Cin Durin Mary Mary	How long employed th		Attachment	for	Addition	al Emplo	ym	ent Inf	ormation	1	
Esti unle	mate monthly income as of the dass you are separated.	te you file this form. If y	S .	. ,		,	•			,		0 1
	u or your non-filing spouse have more se, attach a separate sheet to this form		oine the information	on for all emplo	yers	s for that	oerson on	the	e lines t	elow. If y	ou ne	ed more
						For Del	otor 1			ebtor 2 or ling spou		
2.	List monthly gross wages, salar deductions). If not paid monthly, ca			2.	\$	4	,610.67		\$		N/A	
3.	Estimate and list monthly overti	me pay.		3.	+\$		0.00		+\$		N/A	
4.	Calculate gross Income. Add line	e 2 + line 3.		4.	\$	4,6	10.67		\$	N/	<u>A</u>	

Official Form 106l Schedule I: Your Income page 1

Deb	otor 1	Dell, Victoria Lynn	_	Case	e number (if known)			
	Cor	by line 4 here	4.	Fo:	7 Debtor 1 4,610.67		btor 2 or ing spouse N/A	
5.	·	all payroll deductions:		· -				
J.	5a.	Tax, Medicare, and Social Security deductions	5a.	\$	468.55	\$	N/A	
	5b.	Mandatory contributions for retirement plans	5b.	\$-	0.00	\$	N/A	
	5c.	Voluntary contributions for retirement plans	5c.	\$-	0.00	\$	N/A	
	5d.	Required repayments of retirement fund loans	5d.	\$_	0.00	\$	N/A	
	5e.	Insurance	5e.	\$-	718.47	\$	N/A	
	5f.	Domestic support obligations	5f.	\$	0.00	\$	N/A	
	5g.	Union dues	5g.	\$	0.00	\$	N/A	
	5h.	Other deductions. Specify:	5h.+	+ \$ _	0.00	+ \$	N/A	
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	— 6.	\$	1,187.02	\$	N/A	
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	3,423.65	\$	N/A	
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$		¢		
	8b.	Interest and dividends	oa. 8b.	φ_ \$	0.00	\$	N/A	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.		\$_ \$	0.00	\$ \$	N/A N/A	
	8d.	Unemployment compensation	8d.	\$	0.00	\$	N/A	
	8e.	Social Security	8e.	\$	0.00	\$	N/A	
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f.	\$_	0.00	\$	N/A	
	8g.	Pension or retirement income	8g.	\$	0.00	\$	N/A	
	8h.	Other monthly income. Specify:	8h.+	+ \$_	0.00	+ \$	N/A	
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	0.00	\$	N/A	
10	Cal	culate monthly income. Add line 7 + line 9.	10. \$		3,423.65 + \$		N/A = \$ 3,	423.65
10.		I the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. Ψ		3,423.05			423.03
11.	Star Incli othe Do i	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your dear friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not available.	epender	-			J. 11. +\$	0.00
12.		I the amount in the last column of line 10 to the amount in line 11. The result that amount on the Summary of Schedules and Statistical Summary of Certain.					12. \$ 3 ,	423.65
13.	Do :	you expect an increase or decrease within the year after you file this form' No. Yes. Explain: Please note that debtor's husband is unemploy		d bo	no income		monthly in	
		Yes. Explain: Please note that debtor's husband is unemploy	cu an	u IId	a no micome.			

Official Form 106l Schedule I: Your Income page 2

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Debtor 1	Dell, Victoria Lynn	Case number (if known)	

Official Form B 6I Attachment for Additional Employment Information

Debtor		
Occupation		
Name of Employer	Life Care Center of Brookfield	
How long employed	2 years	
Address of Employer	315 Hunt St	
	Brookfield, MO 64628-2412	
Debtor		
Occupation		
Name of Employer	Phoenix Home Health	
How long employed	3 months	
Address of Employer		

Official Form 106l Schedule I: Your Income page 3

Fill	in this informa	tion to identify yo	ur case:			l		
Deb	otor 1	Victoria Lynr	n Dell			Che	eck if this is: An amended filing	
	otor 2 ouse, if filing)						J	ving postpetition chapter 13 following date:
Unit	ted States Bankr	uptcy Court for the:		RN DISTRICT OF MISSORSON CITY DIVISION	OURI,		MM / DD / YYYY	
	se numbe r (nown)							
	fficial Fo		- - -	505		•		
Be info	as complete a		oossible. I ded, attac	f two married people are				12/1: supplying correct ur name and case numbe
Par	rt 1: Descr	ibe Your Housel	nold					
1.	Is this a join							
	■ No. Go to □ Yes. Doe	line 2. s Debtor 2 live in	a separa	te household?				
	□ N □ Y	-	t file Officia	al Form 106J-2, Expenses	for Separate Houser	noldof Debt	or 2.	
2.	Do you have	e dependents?	□ No					
	Do not list Do Debtor 2.	ebtor 1 and	Yes.	Fill out this information for each dependent	Dependent's relation Debtor 1 or Debtor		Dependent's age	Does dependent live with you?
	Do not state	the						□ No
	dependents	names.			Husband		49	■ Yes □ No
								☐ Yes
								□ No
								Yes
								□ No □ Yes
3.	expenses of	enses include f people other th d your dependen	an \square	No Yes			_	L Tes
exp	timate your ex		ur bankru	r Expenses ptcy filing date unless you is filed. If this is a suppl				
val	lude expenses ue of such as ficial Form 10	sistance and hav	on-cash g ve include	overnment assistance if d it on Schedule I: Your	you know the Income		Your exp	penses
4.		or home ownersh d any rent for the		es for your residence. In ot.	clude first mortgage	4.	\$	400.00
	If not includ	ed in line 4:						
	4a. Real e	state taxes				4a.	\$	0.00
		rty, homeowner's,				4b.	· ———	0.00
		maintenance, rep owner's association				4c.	· ————	100.00
5.				ominium dues u r residence , such as hor	ne equity loans	4d. 5.		0.00

Debtor	Dell, Victoria Lynn	Case num	ber (if known)	
6. Ut i	lities:			
6a	Electricity, heat, natural gas	6a.	\$	400.00
6b	Water, sewer, garbage collection	6b.	\$	100.00
6c	Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	250.00
6d	Other. Specify:	6d.	\$	0.00
7. Fo	od and housekeeping supplies		\$	650.00
	ildcare and children's education costs	8.	\$	0.00
	othing, laundry, and dry cleaning	9.	\$	180.00
	rsonal care products and services	10.	\$	160.00
	edical and dental expenses	11.		
	•	11.	\$	250.00
	ansportation. Include gas, maintenance, bus or train fare. not include car payments.	12.	\$	400.00
	tertainment, clubs, recreation, newspapers, magazines, and books	13.	\$	160.00
		_	· -	
	aritable contributions and religious donations	14.	\$	0.00
-	surance.			
	not include insurance deducted from your pay or included in lines 4 or 20. a. Life insurance	15a.	\$	0.00
_	b. Health insurance	15a. 15b.		
_			·	0.00
	c. Vehicle insurance	15c.	\$	100.00
	d. Other insurance. Specify:	15d.	\$	0.00
Sp	xes. Do not include taxes deducted from your pay or included in lines 4 or 20. ecify: Personal property	16.	\$	20.00
	stallment or lease payments:		_	
	a. Car payments for Vehicle 1	17a.	·	0.00
	o. Car payments for Vehicle 2	17b.	\$	0.00
17	c. Other. Specify:	17c.	\$	0.00
17	d. Other. Specify:	17d.	\$	0.00
8. Yo	ur payments of alimony, maintenance, and support that you did not report as			
	ducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	\$	0.00
9. Ot	her payments you make to support others who do not live with you.		\$	0.00
Sp	ecify:	19.		
0. Ot	her real property expenses not included in lines 4 or 5 of this form or on Scheo	dule I: You	ır Income .	
20	a. Mortgages on other property	20a.	\$	0.00
20	b. Real estate taxes	20b.	\$	0.00
20	c. Property, homeowner's, or renter's insurance	20c.	\$	0.00
	d. Maintenance, repair, and upkeep expenses	20d.	·	0.00
	e. Homeowner's association or condominium dues	20a. 20e.	\$	
			·	0.00
	her: Specify: Pet care	21.	· · · · · · · · · · · · · · · · · · ·	60.00
Bi	rthdays & holidays		+\$	50.00
Ni	cotene expenses		+\$	125.00
2 Ca	Iculate your monthly expenses			
	a. Add lines 4 through 21.		\$	2 405 00
	<u> </u>			3,405.00
	b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	
22	c. Add line 22a and 22b. The result is your monthly expenses.		\$	3,405.00
3 Ca	Iculate your monthly net income.			
	a. Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$	3,423.65
			·	
23	b. Copy your monthly expenses from line 22c above.	23b.	-φ	3,405.00
၁၁.	Subtract your monthly expenses from your monthly income			
23	c. Subtract your monthly expenses from your monthly income. The result is your <i>monthly net income</i> .	23c.	\$	18.65
	The results your monthly net income.		·	
Foi mo	you expect an increase or decrease in your expenses within the year after your example, do you expect to finish paying for your car loan within the year or do you expect you diffication to the terms of your mortgage?			or decrease because of a
	No. Ves Explain here:			
1 1	Yes LEXDIAID Dete:			

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Fill in this in	formation to identify ye	our case:			
Debtor 1	Victoria Lynn De				
	First Name	Middle Name	Last Name)
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	nkruptcy Court for the:	WESTERN DISTRICT O	OF MISSOURI, JEFFERSO	N CITY	
Case number (if known)					☐ Check if this is an
					amended filing
Official Forn	n 106Dec				
		امريانيانيا م	Dobtorio Col	hadulaa	
Declarat	ion About a	an Individual	Deptor's Sci	nedules	12/15
If two married pe	ople are filing together	, both are equally respons	sible for supplying correc	t information.	
obtaining money		n connection with a bankru			ment, concealing property, or), or imprisonment for up to 20
Sign	n Below				
Did you pa	y or agree to pay some	one who is NOT an attorne	ey to help you fill out ban	kruptcy forms?	
■ No					
☐ Yes. N	lame of person				nkruptcy Petition Preparer's Notice,
				Declaratioi	n, and Signature (Official Form 119)
	Ity of perjury, I declare	that I have read the summ	nary and schedules filed w	vith this declaration	n and
X /s/ Vict	toria Lynn Dell		X		
Victori	a Lynn Dell re of Debtor 1		Signature of D	Pebtor 2	

Date **June 11, 2019**

Date _____

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Fill in th	nis information to identi	fy your case:			
Debtor 1	Victoria Lynn De				
Dahtano	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name		
		WESTERN DISTRICT OF	MISSOURI, JEFFERSON	CITY	
United States Ba	ankruptcy Court for the:	DIVISION			
Case number					
(if known)					Check if this is an
					amended filing
Official Fo	orm 107				
Statemen	t of Financial	Affairs for Individ	luals Filing for E	Bankruptcy	4/1
Be as complete	and accurate as possib	ole. If two married people are	e filing together, both are e	equally responsible for suppl	lvina correct
information. If r	more space is needed,			additional pages, write your	
(if known). Ansv	wer every question.				
Part 1: Give	Details About Your Ma	rital Status and Where You	Lived Before		
1. What is you	ur current marital statu	s?			
	ar carront martar ctata	.			
Marrie	d				
☐ Not ma	arried				
2. During the	last 3 years have you	lived anywhere other than w	here you live now?		
z. During the	last 5 years, have you	ived any where other than v	mere you live now:		
☐ No					
Yes. Li	ist all of the places you liv	red in the last 3 years. Do not i	nclude where you live now.		
Debtor 1 P	Prior Address:	Dates Debtor 1	ived Debtor 2 Prior A	ddress:	Dates Debtor 2
		there			lived there
625 N Ka	ınsas Ave	From-To:	☐ Same as Debtor	1	☐ Same as Debtor 1
Marcelin	e, MO 64658-1134	2017 - Decem	ber		From-To:
		2018			
				ity property state or territory	
states and territo	ries include Arizona, Cal	fornia, Idaho, Louisiana, Nev	ada, New Mexico, Puerto Ri	co, Texas, Washington and W	isconsin.)
■ No					
_	Make sure vou fill out Sche	edule H: Your Codebtors (Offic	cial Form 106H).		
	,	(-	,		
Part 2 Expla	ain the Sources of You	Income			
•	-			ear or the two previous calen-	dar years?
		u received from all jobs and a ave income that you receive to			
_	3 , ,		3 , ,		
□ No					
Yes. F	ill in the details.				
		Debtor 1		Debtor 2	
		Sources of income	Gross income	Sources of income	Gross income
		Check all that apply.	(before deductions and	Check all that apply.	(before deductions
			exclusions)		and exclusions)

De		ell, Victoria Lynn	Doc 1 Filed 06 Documen		o/20/19 15:21:28 L	esc main
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		1 of current year until iled for bankruptcy:	■ Wages, commissions, bonuses, tips	\$15,684.46	☐ Wages, commissions, bonuses, tips	
			☐ Operating a business		☐ Operating a business	
	r last calen inuary 1 to	dar year: December 31, 2018)	■ Wages, commissions, bonuses, tips	\$41,957.00	☐ Wages, commissions, bonuses, tips	
			☐ Operating a business		☐ Operating a business	
		dar year before that: December 31, 2017)	■ Wages, commissions, bonuses, tips	\$44,783.00	☐ Wages, commissions, bonuses, tips	
			☐ Operating a business		☐ Operating a business	
	■ No	source and the gross incor	ne from each source separatel	y. Do not include income that	you listed in line 4.	
			Debtor 1		Debtor 2	
			Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of income Describe below.	Gross income (before deductions and exclusions)
Pa	rt 3: List	Certain Payments You	Made Before You Filed for E	Bankruptcy		
.		Debtor 1's or Debtor 2's Neither Debtor 1 nor D individual primarily for a	s debts primarily consumer	debts? mer debts. Consumer debts a purpose."	are defined in 11 U.S.C. § 101(8 \$6,825* or more?	3) as "incurred by an
		No. Go to line 7		, , ,		
		creditor. Do payments to	not include payments for dor an attorney for this bankrupto	mestic support obligations, sury case.	ne or more payments and the to ch as child support and alimon	
	_	* Subject to adjustment	on 4/01/22 and every 3 years	after that for cases filed on or a	after the date of adjustment.	
	Yes.		r both have primarily consule re you filed for bankruptcy, did		\$600 or more?	
		■ No. Go to line 7	· ·			

Creditor's Name and Address

 \square Yes

Dates of payment

Total amount paid

List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

> Amount you still owe

Was this payment for ...

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Case number (if known)

7.	Within 1 year before you filed for bankruptcy Insiders include your relatives; any general partner which you are an officer, director, person in control business you operate as a sole proprietor. 11 U.S.	ers; relatives of any general rol, or owner of 20% or more	partners; partnership of their voting secur	os of which you are rities; and any mana	a general partner aging agent, include	ding one for a
	■ No□ Yes. List all payments to an insider.					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for this	s payment
8.	Within 1 year before you filed for bankruptcy insider? Include payments on debts guaranteed or cosign		nents or transfer an	y property on acc	count of a debt ti	nat benefited an
	■ No□ Yes. List all payments to an insider					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for this	
Pal	rt 4: Identify Legal Actions, Repossessions	. and Foreclosures				
9.	Within 1 year before you filed for bankruptcy List all such matters, including personal injury ca and contract disputes. No Yes. Fill in the details.					
	Case title	Nature of the case	Court or agency		Status of the c	25E
	Case number		,		Otatas of the o	uoc
	Dollar Rent A Car Inc. vs Victoria Kimble 18LI-AC00088	AC Breach of Contract	Circuit Court of County	f Linn	■ Pending □ On appeal □ Concluded	
10.	Within 1 year before you filed for bankruptcy Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below.		ty repossessed, for	eclosed, garnish	ed, attached, sei	zed, or levied?
	Creditor Name and Address	Describe the Property		Date		Value of the property
		Explain what happened				
11.	Within 90 days before you filed for bankrupte accounts or refuse to make a payment because No □ Yes. Fill in the details.		ding a bank or fina	ncial institution, s	set off any amou	nts from your
	Creditor Name and Address	Describe the action the	creditor took	Date a taken	action was	Amoun
12.	Within 1 year before you filed for bankruptcy court-appointed receiver, a custodian, or and No ☐ Yes		ty in the possession	n of an assignee t	for the benefit of	creditors, a

Debtor 1 Dell, Victoria Lynn

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Case number (if known)

Par	t 5: List Certain Gifts and Contributions			
13.	■ No	did you give any gifts with a total value of more th	an \$600 per person?	
	☐ Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave the gifts	Value
	Person to Whom You Gave the Gift and Address:			
14.	Within 2 years before you filed for bankruptcy, ■ No	did you give any gifts or contributions with a total	value of more than \$6	600 to any charity?
	☐ Yes. Fill in the details for each gift or contributi	on.		
	Gifts or contributions to charities that total more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)	Describe what you contributed	Dates you contributed	Value
Par	t 6: List Certain Losses			
15.	Within 1 year before you filed for bankruptcy or or gambling? No Yes. Fill in the details.	r since you filed for bankruptcy, did you lose anyth	ning because of theft,	fire, other disaster,
	how the loss occurred Includ	ribe any insurance coverage for the loss de the amount that insurance has paid. List pending ance claims on line 33 of Schedule A/B: Property.	Date of your loss	Value of property lost
Par	17: List Certain Payments or Transfers			
	Within 1 year before you filed for bankruptcy, d consulted about seeking bankruptcy or prepari	id you or anyone else acting on your behalf pay on ng a bankruptcy petition? , or credit counseling agencies for services required in		y to anyone you
	□ No			
	Yes. Fill in the details.			
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
	Baehr Wiggins PC 1900 N Providence Rd # 205 Columbia, MO 65202-3710	Attorney Fees		\$1,200.00
17.	Within 1 year before you filed for bankruptcy, d promised to help you deal with your creditors on Do not include any payment or transfer that you listed No Yes. Fill in the details.		r transfer any propert	y to anyone who
	Person Who Was Paid Address	Description and value of any property transferred	Date payment or transfer was made	Amount of payment

18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs?

Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include

Debtor 1

Dell, Victoria Lynn

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	gifts and transfers that you have already listed on ■ No □ Yes. Fill in the details.	this statement.					
	Person Who Received Transfer Address	Description and very property transfer		paymen	e any property or ts received or debts exchange	Date transfe made	er was
	Person's relationship to you						
19.	Within 10 years before you filed for bankrupto beneficiary? (These are often called asset-prote ■ No □ Yes. Fill in the details.		y property to a so	elf-settled tr	ust or similar device	of which you ar	re a
	Name of trust	Description and v	value of the prope	arty transfor	red	Date Transf	or was
	Nume of trust	Description and	raide of the prop	city transici	i cu	made	Ci was
Par	rt 8: List of Certain Financial Accounts, Instr	uments, Safe Deposit	Boxes, and Stora	age Units			
20.	Within 1 year before you filed for bankruptcy, sold, moved, or transferred? Include checking, savings, money market, or houses, pension funds, cooperatives, association No	other financial accoun	its; certificates of			·	·
		Last 4 digits of account number	Type of accourant instrument	c n	Date account was closed, sold, noved, or ransferred	Last balance closing or t	
21.	Do you now have, or did you have within 1 ye cash, or other valuables? No Yes. Fill in the details. Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	ar before you filed for Who else had acc Address (Number, S and ZIP Code)	cess to it?	safe deposi		Do you s have it?	·
22.	Have you stored property in a storage unit or ■ No □ Yes. Fill in the details.	place other than your	home within 1 ye	ear before yo	ou filed for bankrupto	y?	
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or to it? Address (Number, S and ZIP Code)		Describe the	e contents	Do you s have it?	till
Par	rt 9: Identify Property You Hold or Control fo	or Someone Else					
23.	Do you hold or control any property that som someone. No Yes. Fill in the details.	eone else owns? Inclu	de any property	you borrow	ed from, are storing f	or, or hold in tr	ust for
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the prop (Number, Street, City, Code)		Describe the	e property		Value
Par	rt 10: Give Details About Environmental Infor	mation					
For	the purpose of Part 10, the following definition	s apply:					
.	Environmental law means any federal, state, or toxic substances, wastes, or material into the	or local statute or regu					

Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Official Form 107

controlling the cleanup of these substances, wastes, or material.

Case 19-20586-drd7 Doc 1 Filed 06/26/19 Entered 06/26/19 15:21:28 Desc Main Document Page 46 of 55 Debtor 1 Dell, Victoria Lynn Case number (if known) own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? No Yes. Fill in the details. Name of site Governmental unit Environmental law, if you Date of notice Address (Number, Street, City, State and know it Address (Number, Street, City, State and ZIP Code) 25. Have you notified any governmental unit of any release of hazardous material? No

Governmental unit

26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.

Address (Number, Street, City, State and

Environmental law, if you

know it

Date of notice

Yes. Fill in the details. **Case Title** Nature of the case Status of the Court or agency **Case Number** Name case Address (Number, Street, City, State and ZIP Code) Part 11: Give Details About Your Business or Connections to Any Business 27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? ☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time ☐ A member of a limited liability company (LLC) or limited liability partnership (LLP) ☐ A partner in a partnership ☐ An officer, director, or managing executive of a corporation ☐ An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. **Business Name Employer Identification number** Describe the nature of the business **Address** Do not include Social Security number or ITIN. (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper **Dates business existed** 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. Yes. Fill in the details below. Date Issued Name Address

I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a

Part 12: Sign Below

(Number, Street, City, State and ZIP Code)

Yes. Fill in the details.

Address (Number, Street, City, State and ZIP Code)

Name of site

No

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Debtor 1 Dell, Victoria Lynn	Case number (if known)
bankruptcy case can result in fines up to \$250,000, 18 U.S.C. §§ 152, 1341, 1519, and 3571.	or imprisonment for up to 20 years, or both.
/s/ Victoria Lynn Dell	
Victoria Lynn Dell Signature of Debtor 1	Signature of Debtor 2
Date June 11, 2019	Date
Did you attach additional pages to Your Statement	of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?
■ No	
☐ Yes	
Did you pay or agree to pay someone who is not an	attorney to help you fill out bankruptcy forms?
■ No	
☐ Yes. Name of Person Attach the Bankruptcy	y Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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Fill in th	nis information to identi	fy your case:		
Debtor 1	Victoria Lynn De			_
	First Name	Middle Name	Last Name	1
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	WESTERN DISTRICT O	OF MISSOURI, JEFFERSON CITY	_
Case number				
(if known)				Check if this is an amended filing

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Have Secured Claims

1. For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below.

Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?
Creditor's	☐ Surrender the property.	□ No
name:	☐ Retain the property and redeem it.	
Description of	☐ Retain the property and enter into a <i>Reaffirmation</i> Agreement.	☐ Yes
property	Retain the property and [explain]:	
securing debt:	— Totali ilo proporty and populinj.	
Creditor's	☐ Surrender the property.	□ No
name:	☐ Retain the property and redeem it.	
Description of	☐ Retain the property and enter into a <i>Reaffirmation</i> Agreement.	Yes
property	☐ Retain the property and [explain]:	
securing debt:		
Creditor's	☐ Surrender the property.	□ No
name:	☐ Retain the property and redeem it.	
Description of	☐ Retain the property and enter into a <i>Reaffirmation</i> Agreement.	Yes
property	☐ Retain the property and [explain]:	
securing debt:		
Creditor's	☐ Surrender the property.	□ No

Official Form 108

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Debtor 1	Dell, Victoria Lynn	Case number (if known)	
name:		☐ Retain the property and redeem it.☐ Retain the property and enter into a Reaffirmation	☐ Yes
	otion of	Agreement.	
propert securin	ry ng debt:	☐ Retain the property and [explain]:	-
or any u	nation below. Do not list real estate lea	ty Leases you listed in Schedule G: Executory Contracts and Unexpired L ses. Unexpired leases are leases that are still in effect; the lease ase if the trustee does not assume it. 11 U.S.C. § 365(p)(2).	
Describe	your unexpired personal property lea	ises	Will the lease be assumed?
Lessor's r	name:		□ No
Description Property:	on of leased		☐ Yes
Lessor's r	name:		□ No
Description Property:	on of leased		
r roperty.			☐ Yes
_essor's r	name: on of leased		□ No
Property:	on or leased		☐ Yes
Lessor's r			□ No
Description Property:	on of leased		☐ Yes
Lessor's r			□ No
Descriptic Property:	on of leased		☐ Yes
Lessor's r	name:		□ No
Descriptic Property:	on of leased		☐ Yes
Lessor's r	name:		□ No
Descriptic Property:	on of leased		☐ Yes
Part 3:	Sign Below		
	nalty of perjury, I declare that I have in that is subject to an unexpired lease.	dicated my intention about any property of my estate that secu	res a debt and any personal
. , , , X /s/ \	Victoria Lynn Dell	X	
Vict	toria Lynn Dell lature of Debtor 1	Signature of Debtor 2	
Date	June 11, 2019	Date	

Fill in this info	ormation to identify your case:		Chook or	o hay anly as d	irected in this form and	in Form
Debtor 1	Victoria Lynn Dell		122A-1S		nected in this form and	III FOIIII
	Victoria Lyrin Deli					
Debtor 2 (Spouse, if filing)			■ 1. 7	here is no pres	umption of abuse	
		of Missouri, Jefferson		applies will be n	o determine if a presun nade under <i>Chapter 7 M</i> cial Form 122A-2).	•
Case numbe	er		□ 3. T	he Means Test	does not apply now becout it could apply later.	ause of qualified
			□ Ch	eck if this is a	n amended filing	
Official	Form 122A - 1				3	
	r 7 Statement of Your Cui	rent Monthly	Incom	е		12/1
a separate she number (if kno military servic	e and accurate as possible. If two married people a set to this form. Include the line number to which the own). If you believe that you are exempted from a p e, complete and file Statement of Exemption from Calculate Your Current Monthly Income	ne additional information ap resumption of abuse becau	oplies. On the use you do no	top of any addit t have primarily	ional pages, write your r consumer debts or beca	name and case luse of qualifying
1. What is	s your marital and filing status? Check one on	ly.				
■ Not	married. Fill out Column A, lines 2-11.					
☐ Mar	ried and your spouse is filing with you. Fill ou	it both Columns A and B,	lines 2-11.			
☐ Mar	ried and your spouse is NOT filing with you.	You and your spouse ar	e:			
□Li	iving in the same household and are not lega	Ily separated. Fill out bot	h Columns A	and B, lines 2-	11.	
р	iving separately or are legally separated. Fill of benalty of perjury that you and your spouse are legapart for reasons that do not include evading the N	gally separated under nonb	ankruptcy la	w that applies or		
101(10A). F 6 months, a	average monthly income that you received from all For example, if you are filing on September 15, the 6-madd the income for all 6 months and divide the total by me rental property, put the income from that property in	nonth period would be March 6. Fill in the result. Do not inc	1 through Aug clude any incor	ust 31. If the amo ne amount more t	unt of your monthly incom han once. For example, if	e varied during the
			Colui Debte		Column B Debtor 2 or non-filing spouse	
	ross wages, salary, tips, bonuses, overtime, adductions).	and commissions (before	e all \$	4,610.67	\$	
	y and maintenance payments. Do not include a B is filled in.	payments from a spouse	if \$	0.00	\$	
of you from an roomma	ounts from any source which are regularly pa or your dependents, including child support. unmarried partner, members of your household, ates. Include regular contributions from a spous include payments you listed on line 3	Include regular contributi your dependents, parents,	ons , and	0.00	\$	
5. Net inc	ome from operating a business, profession,					
		Debtor 1				
	receipts (before all deductions)	\$ 0.00				
	y and necessary operating expenses	-\$ <u>0.00</u> m \$ 0.00 Copy h	oro -> ¢	0.00	\$	
	nthly income from a business, profession, or far	m \$ Copy ii	eie -> φ	0.00	Ψ	
b. Net inc	ome from rental and other real property	Debtor 1				
Groce r	eceints (hefore all deductions)	\$ 0.00				
	eceipts (before all deductions) y and necessary operating expenses	-\$ 0.00				
	nthly income from rental or other real property	\$ 0.00 Copy h	ere -> \$	0.00	\$	
	t dividends and royalties	Ψ σοργ	\$	0.00	\$	

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Dell, Victoria Lynn Debtor 1 Case number (if known) Column A Column B Debtor 1 Debtor 2 or non-filing spouse 8. Unemployment compensation 0.00 Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here: For your spouse \$ 9. Pension or retirement income. Do not include any amount received that was a benefit 0.00 under the Social Security Act. 10. Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism. If necessary, list other sources on a separate page and put the total below. 0.00 0.00 Total amounts from separate pages, if any. 0.00 \$ 11. Calculate your total current monthly income. Add lines 2 through 10 for 4,610.67 \$ 4,610.67 each column. Then add the total for Column A to the total for Column B. Total current monthly Part 2: **Determine Whether the Means Test Applies to You** 12. Calculate your current monthly income for the year. Follow these steps: 12a. Copy your total current monthly income from line 11 Copy line 11 here=> 4,610.67 **x** 12 Multiply by 12 (the number of months in a year) 55.328.04 12b. The result is your annual income for this part of the form 12b. 13. Calculate the median family income that applies to you. Follow these steps: MO Fill in the state in which you live. Fill in the number of people in your household. 61,310.00 Fill in the median family income for your state and size of household. To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy cleix office. 14. How do the lines compare? 14a Line 12b is less than or equal to line 13. On the top of page 1, check box There is no presumption of abuse. 14b. Line 12b is more than line 13. On the top of page 1, check box 2The presumption of abuse is determined by Form 122A-2. Go to Part 3 and fill out Form 122A-2. Part 3: By signing here, I declare under penalty of perjury that the information on this statement and in any attachments is true and correct. X /s/ Victoria Lynn Dell Victoria Lynn Dell Signature of Debtor 1 Date June 11, 2019 MM / DD / YYYY If you checked line 14a, do NOT fill out or file Form 122A-2.

If you checked line 14b, fill out Form 122A-2 and file it with this form.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee \$1.717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.